After doing a project on HIV/AIDS in Uganda, I was intrigued by the drastic decrease in their AIDS rate from 30% in 1992 to 6% in 2002. I was impressed at how the government and the people of Uganda came together to combat AIDS. This fight was led by President, Yoweri Museveni and his wife, first lady, Janet Museveni. I felt that Uganda's success should be a model for other countries to follow, especially, their HIV/AIDS education program. This program was based on the ABC program; Abstain, Be faithful, or Condomize. Therefore, while I was in Kenya this summer I could not help but travel to Kampala to do some HIV/AIDS research. I formulated a questionnaire and tried to talk to as many people as I could. A lot of my interviews were more like casual conversations. However, they provided me with a plethora of useful information. I found people would share more, the more comfortable they were, especially when it came to this topic. This paper contains the results, along with a sociological outlook on the HIV/AIDS epidemic in Uganda. From my research I have formed theories and ideas which I think could help us continue to successfully fight this pandemic.

Introduction

Before you begin to analyze any problem, first you must look at the system which it exists in. AIDS is a global pandemic. It is affecting people on every continent, in every country, and state. However, this paper focuses on Africa, in the country of Uganda. Uganda's AIDS rate has dropped drastically is the last ten years. Whether it is due to deaths, incorrect calculations, behavior change, or a country coming together as one, Uganda has gained recognition for their approach to fighting AIDS.

In 1986, President Yoweri Museveni, committed to fighting AIDS by organizing a conference drawing potential donors for prevention efforts and establishing the National AIDS Control Program with the Ministry of Health (Global Initiatives; Buonocore, 2003). He made a bold statement as the countries leader to work with his people to combat this pandemic. To him AIDS was not a problem among his people it was a problem the whole country was dealing with. As their leader he acknowledged the problem and began implementing ideas and programs to help deal with it. In 1992, Museveni openly declared war on AIDS, leading to the establishment of (UAC) Uganda AIDS Commission. The UAC coordinates stakeholders in the fight vs. AIDS. It was set up under an act of parliament, with the President himself being the first chairperson” (Matsamura; Buonocore, 2003). Now the Commission is a head quarters for AIDS information. My conversation there with Joyce jump started my research. She showered me with books, contacts, and other information. This program is evidently succeeding in its mission.

Unfortunately, it is not just AIDS that we are looking at here it is a pandemic surrounded by issues that prohibit solutions. Poverty, poor health, bad job markets, gender inequality, and orphans, are just a few of the issues surrounding the HIV/AIDS pandemic. You can not give a person medicine to take if they have no food to eat. They would rather have the food to nourish their bodies. You can tell women how to use condoms, but you can not make men listen to them. You can feed the orphans, but at the end of the day they go home alone and lonely. Sex workers can not stop prostituting if there are not other jobs available. Think about it, should they die of starvation or AIDS? All these issues, all these problems, are enough to overwhelm anyone. But when you look at them piece by piece and really sit down and evaluate the whole system you realize not all hope is gone. Something can be done about this pandemic. We can make a difference.

Where does one start…with children? The adults of tomorrow need to be educated. How can this be accomplished when AIDS is taboo and the stigma is so strong people do not even want to say the word. First, the stigma must be broken down and continue to diminish over time. This was one of the main reasons Uganda succeeded in dropping their AIDS rate. While there still is stigma in Uganda it is not as strong
as other African countries. President Museveni played a large role in helping to break the stigma. By addressing the issue himself, in front of his people, and making a commitment to work with his people to fight AIDS he made talking about AIDS acceptable. He began to break down the stigma that surrounded HIV/AIDS so that people would discuss it. Through these discussions change was facilitated. Museveni then went on to develop an education program so that children in primary schools would receive HIV/AIDS education. His belief was that if their parents did not want to talk to them about sex, then their teachers would teach them about it. This program was called PIASCY, Presidents Initiative on AIDS Strategy for Communication to Youth. This program is unique to Uganda and includes some aspects the ABC program.

The ABC program is what many Ugandans say helped them reduce their AIDS rate. ABC stands for Abstain, Be faithful, or Condomize. The idea behind it was that individuals should abstain. However, if they could not or decided not to they should be faithful to one partner. If they can not abstain or be faithful they should use condoms to protect themselves from AIDS. This approach to the AIDS pandemic addresses many of the different situations surrounding the pandemic. Yes, individuals should abstain. They should wait until marriage; however marriage is not the answer to not contracting AIDS. Both partners should take HIV tests before having sex regardless of whether or not they are getting married. If they both are negative and they get married they have committed to being faithful to one another. However, polygamy is common in Uganda, couples should use condoms unless they are trying to conceive and/or “know” their spouse is being faithful. Condoms are also important for people to be informed about due to the high poverty levels in Uganda. If a girl or boy has no where to live and nothing to eat because they have been orphaned due to AIDS, sex in exchange for food and shelter does not seem so bad. In this situation, abstinence means nothing to them. It comes down to abstaining or fulfilling basic needs, food and shelter. One activist said:

“Abstinence is a message for the elite; it has no place in the slums. These orphans live five to a room and there is no food. The man outside says he will provide money and shelter. What is she going to do abstain? These orphans need their needs to be met. They need protection and non-judgmental messages. Abstinence messages around here are a waste of time and money” (Cohen, 2005).

You can never tell what an individual is going through or the conditions in which they live. Therefore, it is their human right to be educated about the choices they can make and how they can protect themselves (Cohen, 2005). Children need to know all we can teach them about HIV/AIDS. Yes, they should be encouraged to make healthy, moral decisions, but they should also know how to protect themselves regardless of the choices they make.

PIASCY was designed to educate the youth about HIV/AIDS, sex, and how to protect themselves. It reaches out to train teachers to educate the youth about these issues. PIASCY is president Museveni’s approach at implementing HIV/AIDS education in the schools. Books were written to advise teachers on messages to give the children and suggestions for teaching lessons. There were different messages for Peer 1-3, Peer 3-5, and Peer 5-7 (Their Peers are similar to our grades, expect due to circumstances there are children of all ages in some Peers). Each school was supposed to talk about HIV/AIDS at least once a week. They were supposed to have assemblies at least once a week that held a different message and discussed HIV/AIDS. I was encouraged to go out and interview schools to see if and how PIASCY was being implemented. I also wanted talk with people that created and facilitated the PIASCY program. I made appointments with the senior assistant director at the Ministry of Education and an individual at the Uganda Youth Anti AIDS Association.

**Method**

I visited 11 schools; 6 were primary (elementary) schools and 5 were secondary (high) schools. Only 10 of the schools will be used because one visit to a primary school was very unsuccessful and only one question on
the survey was answered. Therefore, the data is from 5 primary and 5 secondary schools in Kampala, Uganda. Out of the primary schools 4 were private and 1 was public. Out of the secondary schools 3 were public and 2 were private. Public schools are referred to as government schools and at many of them additional fees are required. I was encouraged to interview more private than public schools since public schools are required to use the PIASCY program. However, I tried to visit both since what is required is not always done, unless someone is watching. Mostly headmasters, principals, and teachers were interviewed. At some of the secondary schools I spoke to members of the school’s AIDS club. At each school I introduced myself and explained that I was an undergraduate student doing HIV/AIDS education research. Each representative was shown the consent form and the research questions, even the students I spoke with. I made sure they read and understood the consent form and the questions before the interview began. I offered them copies of either in case they wanted to keep them in their records. I also interviewed a representative at the ministry of education and at the Uganda Youth Anti-AIDS Association. Both of these men had helped write the PIASCY handbooks. I also had causal discussions with several other individuals that included volunteers and residents of Uganda. I prompted them with some of the research questions, but my main goal in those conversations was to listen to their thoughts and opinions rather than get answers to questions. I tried to gather all the materials and resources I could to complement my research. I took pictures to show my research in action and exemplify some of my findings. My main objective was to see how HIV/AIDS education was implemented in Uganda and observe if it had impacted the decrease in their AIDS rate. All of the information I gathered was compiled to get a better idea of how children in Uganda are educated about HIV/AIDS.

Results

My initial interest in AIDS education in Uganda stemmed from the fact that it begins so early in school, around Peer 3 (Third grade). In the U.S., sex education does not begin until the fourth or fifth grade. Little emphasis is put on HIV/AIDS, let alone sex and condoms. Especially, in most of our private schools which are usually religious. Using the ABC program was also interesting, because it gave the children options although A, abstain is the best choice. Children may abstain for a while, however when they become teens and adults they may find a partner they want to be with. At this time the knowledge of B and C will come into use. Therefore, individuals have the knowledge to protect themselves through out life. Not to mention these days children are becoming sexually active younger and younger. “Research has shown that children in Uganda are having their first sexual experience by age 8” (Aggery Ki Benge, personal communication, July, 2005). Informing kids while they are young teaches and imprints ideas into their minds that they can refer to later in life. Not to mention it seems that children are experimenting with sex regardless of whether or not they have knowledge about it. So teaching children how to protect themselves and the importance of abstinence is not facilitating sex, but rather helping children be safe if they choose to experiment with sex.

Children are very impressionable they look up to and respect their elders and teachers, especially in Africa. Teachers are given the utmost respect in Uganda. It is also a cultural taboo for parents to talk to their children about sex. It is usually done by an Aunt or Uncle if the children are talked to at all (Ruth, personal communication, July, 2005). This is another reason why Museveni felt it was important for HIV/AIDS education to be integrated into the school curriculum. By instilling morals, values, and information in children's minds while they are growing and developing there is a better chance it will make a lasting impact.

All ten schools had solid HIV/AIDS education programs. Everyone interviewed was excited and eager to take part in the project. Each school seemed to take real pride in their HIV/AIDS programs.

Two of the five primary schools had a religious association. Both of the schools had condom information, even though they did not have demonstrations or condoms available. None of the primary schools made condoms available and only one had condom demonstrations for their older students. All schools said they felt their students were too young to receive condoms and/or it would upset their parents. All of the schools did teach the children what condoms were even though they emphasized abstinence. ABC was used at all the schools except for one. That school only stressed A, abstinence, however they did provide some condom information and demos for their older students. Three out of the five schools said they had some
stigma, but it was not that bad and two schools said they had no stigma. When it comes to something as controversial as AIDS it seems impossible for the stigma to completely disappear. Three of the five schools used the PIASCY program and materials from it. Two of the five schools had AIDS clubs. At Waterford Primary I was asked to speak to the children, but actually they spoke more to me. The students ages seven to ten sent me off with messages for American students. These included: “I want to tell them to abstain” and “I want to tell them not to fear people with AIDS” (personal communication, July, 2005). I was amazed that students that young could speak to me about the AIDS pandemic and provide me with such heartfelt messages.

Four of the five secondary schools had a religious association. However, only one, which was deeply Muslim, provided very little condom information and predominately only stressed abstinence. None of the secondary schools provide condoms and only one had condom demonstrations. All the schools except for one did inform the students about condoms. The lack of condom demonstrations was surprising considering the age of the students. Most teens begin experimenting with sex around the age of 14 or 15. Secondary school seems as though it would be the prime time to really inform the students about condoms and have them available for them. Abstinence should still be encouraged, but reality must also play a role in their education. All the schools encouraged abstinence and three of the five used ABC. However, two of the schools only used A, abstinence. All the schools reported that they did not have much stigma and one in particular talked about how the stigma had definitely improved in the last couple years. Three of the five schools used PIASCY based objectives, since the books have not been distributed yet. Three of the five schools also had well developed AIDS clubs that were very active within the school. Upon entering both Kibuli and Nabisunsa schools at the entrance there is a welcome sign from the AIDS club. Kibuli’ AIDS club created an activity called talking trees. They post signs on the trees with messages about AIDS. The logic behind this is that their parents will see the signs when they come and visit. Hopefully the signs will facilitate discussion between the parents and children. This way the topic is out there in the open and almost has to be addressed.

Discussion

These results were both expected and unexpected. The fact that none of the schools distributed condoms was surprising. I can understand why the primary schools would not, but it seems the secondary schools should. Especially, with the ABC program. However, that was also not used as much as expected. Abstinence was stressed and made the focal point a lot more than was predicted. While there was some stigma, it definitely did not seem to be very detrimental to the education process. Everyone was eager to talk and share what they knew about AIDS and how they were fighting it. However, interactions between infected and uninfected individuals were not observed. There may have been a difference in stigma between discussing AIDS and interacting with an individual with AIDS.

The PIASCY program whether directly used or not was definitely a basis for most of the education. This was evident through the many schools that held assemblies and/or class discussions. All the representatives interviewed respected the president and his approach. Each felt it was their duty for their school to have a good AIDS education program and follow the president’s initiative in the fight against AIDS.

The PIASCY books are very educational and diverse. They address many of the issues surrounding AIDS. They not only teach the children about their bodies, puberty, and sex, but also about how to avoid bad touch and protect themselves. Kunya Jacob at Waterford, explained how the inappropriate relationships within families and the pressure the girls face really contributes to the problem (personal communication, July, 2005). When you have already been forced not to abstain, what is the point is abstaining after your virginity was stolen? The books could provide some more information on condoms and examples of how and when to use them. However there is a problem with condoms, the controversy that surrounds them. Condoms equal sex. However, condoms also equal protection and reduce the transmission of AIDS. Condoms cost money and so do AIDS programs. Where is this money coming from? A lot of it is coming from PEPFA, President Bush’s emergency plan for AIDS relief. Along with the money comes a stipulation, of the 20% set aside for prevention methods 33% of that must be spent on abstinence education
U.S. organizations do not like to give money to programs that are not supporting abstinence. “With funding coming in now, for any youth activity, if you talk about abstinence in your proposal you will get the money,” (Teenager in Kampala; Cohen, 2005). Since abstinence is the main value promoted in the U.S. our country's politicians feel it should be the message that is promoted in all countries because “No sex equals No AIDS.” However, it is not that simple. Not in a country where sleeping with a man determines whether or not you eat that day. Therefore, children must be thoroughly educated. They need to know each part of ABC and how to deal with the challenges associated with it. After reading Human Rights Watch, which discussed the change in PIASCY books and Uganda's AIDS programs, I noticed the difference in the research I had done in 2002 and 2005. In 2002, most of the research talked about how Uganda came together as a country to fight AIDS through informing as many people as they could and following the slogan, ABC. The AIDS rate had decreased and although many programs encouraged abstinence, they also encourage being faithful and condomizing. Condom use increased among Ugandans and 98% of sex workers said they used condoms in 2000 (Global Initiative; Buonocore, 2003). I definitely expected to see more condoms and condom demonstrations in the secondary schools in Uganda.

I was not aware that PIASCY books were finished and tested in 2003, and then rewritten and distributed in 2004 (with first edition printed on the front), until reading the Cohen's Human Rights article. Apparently, many religious groups in Uganda felt that the books provided too much information on condoms and sex. They felt examples of how to put on a condom needed to be taken out along with material talking about children that have sex and how they can protect themselves. They also insisted on including a section on ethics and morals. Soon an employee from USAIDS contacted the Ministry of education and said “The books needed to be re-worked so that everyone would find them acceptable” (Cohen, 2005). So the books were re-done and distributed in February 2004. The secondary school PIASCY books are still being written and should be distributed sometime next year. However, I wonder if they too had to or will have to be re-written. I find it interesting that Edward at UYAAS and Aggery at the Ministry of Education did not mention any of this, but rather just explained the books and how they took part in writing them. When flipping through the books, the changes are evident. It would have been interesting to see the original PIASCY books and compare. It will be interesting to see how the final copies of the secondary books turn out.

**Critique**

Comparing the training of the teachers in 2002 and what they taught in their classrooms with the training and the lessons taught by teachers in 2005 would show how much impact re-writing the books made. Condoms may have been discussed and more available before the books were revoked. Conducting another study of the primary and secondary schools in the next two years would be interesting to compare to the above results. This would occur after the secondary books were distributed and used. Whether or not abstinence education increased, decreased, or remained the same may depend on the distribution of those books and the training the teachers receive. It would be interesting to look for correlations between the HIV/AIDS rate is Uganda and the path education is taking. Will U.S. funds lead to more abstinence and less condoms or will Uganda fight to fully educate their youth? A country that has come so far should not back down now. Their approach to fighting AIDS was successful, and their evaluation of ABC shows that it is still relevant in their fight.

In conclusion, Uganda has evaluated the disease that was tearing apart their country. President Museveni and his wife addressed AIDS in order to break the stigma and let their people know the disease must be fought full force. ABC was developed and PIASCY was implicated. The results look positive. Children should be able to tell you about the disease that killed their parents and how they can prevent getting it. The only way to prevent AIDS is to educate and inform others about it. There are college students in the United States that could not tell me what those 7-10 year olds did at Waterford. Ignorance is not bliss, it is dangerous and life threatening. My fear is that if the U.S. does not improve their HIV/AIDS education their rates will begin to soar. Regardless of how many schools teach abstinence or how to use condoms, the point is that every school had some kind of HIV/AIDS education program. Several also had AIDS clubs run by students. There were music and dance competitions that embraced messages about...
HIV/AIDS. If something is constantly talked about, it can not be forgotten or avoided. AIDS is not something that can be pushed under a rug or ignored by turning one’s head. It will conquer the human race if that approach is taken. Schools every where, not just in Uganda, need to teach AIDS as they would any other subject. The lessons must be clear, concise, and provide the students with as much information as possible. In the words of Nelson Mandela’s wife, Graca Machel, “It is possible to have a generation without HIV/AIDS. We are the ones to make it possible,” (Christian aid).

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